PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

		CLA		S FILED - olumn 1)	PA	RT I (Colui	mn 2)	9	MALL E	ENTITY	OR	OTHER SMALL	
FC)R			RFILED		NUMBER E		Г	RATE	FEE)] [RATE	FEE
BASIC FEE								-	I A I L	345.00	OR	TIME	690.00
TOTAL CLAIMS			120minus 20=			* /00			X\$ 9=	900	OR	X\$18=	
	EPENDENT CL			7 minus	_	• 4			X39=	156	OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT $ eglip e \S$									+130=	130	OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL	1531	OR	TOTAL	
	C		S AS A umn 1)	MENDED	IDED - PART II (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY								
AMENDMENT A		REM A	AIMS IAINING FTER NDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	*		Minus	***		=		X39=		OR	X78=	
 	FINOT FRESE	NIAIN	JN OF IVIC	DETIFIE DET	CIVE	DENT CLAIN			+130=		ОR	+260=	
		-						 	TOTAL		OR	TOTAL ADDIT. FEE	
		(Col	umn 1)		ıc	Column 2)	(Column 3)	AU	DIT. FEE	<u> </u>		ADDII. FEEI	12.07
ENT B		REN A	_AIMS MAINING FTER NDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	*	ON OF M	Minus	**		=		X39=		OR	X78=	
	FIRST PRESE	NIAII	JN OF IVIC	DETIFIE DET	CIVI	DENT OLAIM			⊦ 130=	•	OR	+260=	·
								AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Co	umn 1)		(0	Column 2)	(Column 3)						
AMENDMENT C		REN A	_AIMS MAINING FTER NDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	**	*	=		X39=		00	X78=	
	FIRST PRESE	NTATI	ON OF MI	JLTIPLE DEI	PEN	DENT CLAIM		\vdash			OR		
	If the enter in eater	me 1 ic	lace than t	no ontry in solv	ıme o	write "0" in co	lumn 3	L	130=	· · · · · · · · · · · · · · · · · · ·	OR	+260=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	it the "Highest Nu The "Highest Nun	nber Pre	eviously Pa	id For" (Total o	r Inde	ependent) is the	highest number	found	in the app	propriate bo	x in col	umn 1.	

This for INTERNAL PO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 9/575195

Total Fee Calculation

		lotal Fee	: Calculation	a		
	Fee Cade	Taul # Claims	Number Extra X	Fee	Fee	- Total
•	Sa./L;			Sim. Entiry	Le Entiry	
Basic Filing Fee	201/101			345		
Total Claim: >20	201/101 .	120 -29 -	<u>100</u> x	900		
Independent Claum: >]	202/102	7 -1-	<u>4</u> x	156		
Mult. Dep Claim Present	204/104		·	130		
Surcharge	205/105		•		-	
English Translation	1]7 .		ÁSS1910m	ent 40	-	
TOTAL FEE CALCULA	KION			1571		
Fees due upon filing t	te application.					
Total Filing Fees Due	= 5	1531				
Less Filing Fees Submi	ined - S	813	,00			
BALANCE DUE	= 5	1571				
J.M						
Office of Initial Patent E	xariunation					

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)